

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	62501
FORMALITY REVIEW	SL	1021	08/09/01
RESPONSE FORMALITY REVIEW	A-M	SC 580	10-29-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	1-8/12/01	
2	✓	1-8/12/01	
3	✓	1-8/12/01	
4	✓	1-8/12/01	
5	✓	1-8/12/01	
6	✓	1-8/12/01	
7	✓	1-8/12/01	
8	✓	1-8/12/01	
9	✓	1-8/12/01	
10	✓	1-8/12/01	
11	✓	1-8/12/01	
12	✓	1-8/12/01	
13	✓	1-8/12/01	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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10/10/01  
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